

Please type a plus sign (+) inside this box ☐Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

0010/PTO Rev. 6/95 U.S. Department of Commerce Patent and Trademark Office DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing	Attorney Docket Number	960296.97290
	First Named Inventor	Alan D. Attie
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

INHIBITION OF LIPOPROTEIN SECRETION

the specification of which

(Title of the Invention)

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign applications numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. QBMAD\223519

DECLARATION

Page 2

I hereby claim benefit under Title 35, United States Code § 120 of any United States application(s), or § 365(C) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application or PCT International application in the manner provided in the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and all continuation and divisional applications based thereon, and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name Customer Number or label

☒ List attorney(s) and/or agent(s) name and registration number below

Name	Registration Number	Name	Registration Number
Thomas W. Ehrmann	20,374	David G. Ryser	36,407
Herbert W. Mylius	24,578	Bennett J. Berson	37,094
Barry E. Sammons	25,608	Michael A. Jaskolski	37,551
J. Rodman Steele	25,931	Richard T. Roche	38,599
Nicholas J. Seay	27,386	Mark D. Passler	40,764
George E. Haas	27,642	Stanley A. Kim	42,730
Michael J. McGovern	28,326	Scott D. Paul	42,984
Carl R. Schwartz	29,437	John T. Pienkos	42,997
Gregory A. Nelson	30,577	Daniel G. Radler	43,028
Keith M. Baxter	31,233	Gregory M. Smith	43,136
John D. Franzini	31,356	Steven J. Wietrzny	44,402
Joseph W. Bain	34,290	Steven M. Greenberg	44,725
Robert J. Sacco	35,667	David M. Kettner	45,598
Jean C. Baker	35,433	Adam J. Forman	46,707

☐ Additional attorney(s) and/or agents named on a supplemental priority sheet attached hereto

Please direct all correspondence to ☐ Customer Number or label OR ☒ Fill in correspondence address below

Name	Nicholas J. Seay				
Address	Quarles & Brady LLP				
Address	P O Box 2113				
City	Madison	State	WI	Zip	53701-2113
Country	USA	Telephone	(608)251-5000	Fax	(608)251-9166

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Name of Sole or First Inventor:		A petition has been filed for this unsigned inventor					
Given	Alan	Middle	D	Family	Attie	Suffix	
Inventor's Signature						Date	
Residence:	Madison	State	WI	Country	US	Citizenship	US
Post Office	1906 Vilas Avenue						
Post Office							
City	Madison	State	WI	Zip	53711	Country	US
						Applicant Authority	
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto							

Please type a plus sign (+) in this box ☐

DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet										
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor										
Given	Donald					Middle	Gillian-Daniel					Suffix								
Inventor's										Date										
Residence:					Madison					State	WI		Country	US			Citizenship	US		
Post Office					3497 Milwaukee Street															
Post Office																				
City	Madison					State	WI		Zip	53714-2257			Country	US			Applicant Authority			
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor										
Given	Paul					Middle Initial	Bates					Suffix								
Inventor's										Date										
Residence:					Madison					State	WI		Country	US			Citizenship	US		
Post Office					6602 Pilgrim Road															
Post Office																				
City	Madison					State	WI		Zip	53711			Country	US			Applicant Authority			
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor										
Given						Middle						Suffix								
Inventor's										Date										
Residence:										State			Country				Citizenship			
Post Office																				
Post Office																				
City						State			Zip				Country				Applicant Authority			
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor										
Given						Middle						Suffix								
Inventor's										Date										
Residence:										State			Country				Citizenship			
Post Office																				
Post Office																				
City						State			Zip				Country				Applicant Authority			
Additional inventors are being named on supplemental sheet(s) attached hereto																				

100% recycled paper, 50% post-consumer waste. Recycled paper is good for the environment.